

	MIDWIFERY INFORMED CHOICE POLICY
	Date Effective: 2022-06-10
	Revised: 2025-12-01
	Next Review Due: 2028-12-01

Background

Informed choice is a fundamental principle of midwifery care in Prince Edward Island. Clients have the right to receive information so that they can make informed decisions about their care. The childbearing client is recognized as the primary decision-maker. The interactive process of informed choice involves the promotion of shared responsibility between the registered midwife (RM) and the client. The informed choice process ultimately results in either informed consent or informed refusal.

Purpose

It is the responsibility of the RM to facilitate the ongoing exchange of current knowledge in a non-authoritarian and cooperative manner, including sharing what is known and unknown about procedures, tests, and medications. This policy assists the RM to navigate the informed choice process.

1.0 Policy

- 1.1 The RM upholds the client's right to make informed choices and the client's right to provide consent about all aspects of their care throughout the childbearing experience.
- 1.2 The RM provides relevant information to the client in an unbiased manner.
- 1.3 The RM respects and values the cultural and spiritual needs of the client.
- 1.4 The RM provides professional judgement and best available evidence.
- 1.5 The RM advises the client of maternity care standards and the RM's professional judgement with respect to safe care.
- 1.6 The RM shall respect, support and advocate for the client's choices.

- 1.7 The RM encourages the client to actively participate in decisions about their care and the manner in which services are provided, and respects the degree to which the client wants to be involved in decisions about their care.
- 1.8 The RM discusses with the client the scope, standards and limitations of midwifery care.
- 1.9 The RM has a responsibility to recommend care they determine is in the best interest of their client; the client may accept or decline their recommendation and the RM respects the client's right to accept or decline treatments or procedures.
- 1.10 The RM acts as an advocate for the client and their newborn.
- 1.11 The RM provides the client with the following information at the onset of their care:
 - 1.11.1 education in midwifery of the midwives providing care;
 - 1.11.2 services provided, including scope of practice, philosophy of care and choice of birth setting;
 - 1.11.3 contact information, including how the client can reach a midwife known to them;
 - 1.11.4 change of appointment procedure, off-call coverage arrangements, and back-up arrangements;
 - 1.11.5 standards of practice and protocols including continuity of care, consultation and transfer of care and supportive care;
 - 1.11.6 role and responsibilities of the client;
 - 1.11.7 confidentiality and access to client records;
 - 1.11.8 midwifery student(s) and/or midwives in supervised practice arrangements involved in the client's care.
- 1.12 Throughout the course of care the RM provides the client with the following information:
 - 1.12.1 explanation of potential benefits and risks of, and alternatives to, procedures, tests and medications in ways that clients can understand;
 - 1.12.2 relevant research evidence;
 - 1.12.3 community standards and practices;
 - 1.12.4 second attendant arrangements
 - 1.12.5 opportunities to discuss information.

1.13 Emergency situations

1.13.1 As a clinical situation evolves, the RM shall discuss with the client any obstetrical or neonatal emergency than can be reasonably anticipated;

1.13.2 In the event of an unforeseen obstetrical or neonatal emergency, the RM must make every reasonable effort to involve the client in decision-making when appropriate;

1.13.3 When this cannot be achieved, the RM must keep the client as informed and involved as possible;

1.13.4 As soon as possible during the emergency event, the RM shall engage the client in a full discussion and disclosure of the care provided.

1.14 Informed choice discussions should be documented in the medical record and results communicated with the health care team.